

BUREAU OF ALCOHOLIC BEVERAGES
Division of Liquor Licensing & Enforcement
164 State House Station
Augusta, ME 04333-0164



BREWER OF MALT LIQUOR
EXCISE TAX & PREMIUM REPORT

NAME OF LICENSE HOLDER

LICENSE NUMBER

NAME OF BREWERY

CURRENT LICENSE EXPIRES

STREET ADDRESS

MONTH OF WITHDRAWAL

TOWN

ZIP

PHONE #

- (1) TOTAL GALLONS OF MALT LIQUOR WITHDRAWN
FROM BOND THIS LICENSE YEAR TO DATE.
- (2) TOTAL GALLONS OF TAX PAID MALT PREVIOUSLY REPORTED TO
LIQUOR LICENSING AND INSPECTION UNIT THIS YEAR.
- (3) TOTAL GALLONS WITHDRAWN THIS MONTH.
(SUBTRACT LINE 2 FROM LINE 1)
- (4) PLUS TRANSFERS IN FROM OTHER BREWERIES.
(ATTACH INVOICES)
- (5) LESS TOTAL CREDITS CLAIMED.
(ATTACH DOCUMENTARY EVIDENCE TO JUSTIFY CLAIM)
- (6) LESS TRANSFERS OUT TO OTHER BREWERIES.
(ATTACH INVOICES)
- (7) TOTAL TAXABLE GALLONS THIS MONTH.
- (8) NET EXCISE TAX DUE.
(MULTIPLY LINE 7 X .25)
- (9) NET PREMIUM DUE
(MULTIPLY LINE 7 X .10)
- (10) TOTAL NET TAX DUE.
(ADD LINES 8 & 9)

(1) _____

(2) _____

(3) _____

(4) _____

(5) _____

(6) _____

(7) _____

(8) _____

(9) _____

(10) _____

PAID BY CHECK # _____

DATED: _____

SIGNED BY: _____

DATED: _____

THIS REPORT MUST BE FILED BY THE 15TH OF THE MONTH IMMEDIATELY FOLLOWING WITHDRAWAL FROM THE
BONDED AREA.

REVISED 12/13